



1. CORRESPONDENCE ADDRESS

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18M1/0410

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4-75-95

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/292,058	08/17/94	004	MCGLASHEN, M	1809 04/10/95
First Named Applicant SOLAZZI, MONTE J.				

TITLE OF INVENTION APPARATUS FOR TRIMLESS SAMPLE CUP USED IN X-RAY SPECTROSCOPY
(AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	CHEMPLEX3FWC	422-102.000	K58	UTILITY	YES	\$605.00 07/10/95

DO NOT USE THIS SPACE

406

050 4W 07/03/95 08 292058 1 561 30.00CK
050 4W 07/03/95 08 292058 1 242 645.00CK

2a. The following fees are enclosed:

☒ Issue Fee ☒ Advance Order - # of Copies 10

2b. The following fees should be charged to:

DEPOSIT ACCOUNT NUMBER 16-2131

☒ Issue Fee ☒ Advance Order - # of Copies 10

☒ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the Application identified above.

(Authorized Signature)

ARTHUR L. PLEVY

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TRANSMIT THIS FORM WITH PART B WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
<p>**CORRECTED COPY**</p> <p>ARTHUR L. PLEVY 146 ROUTE 1 NORTH P O BOX 1366 EDISON NJ 08818-1366</p> <p>DOCKETED DATE 4-15-95</p>		<p>INVENTOR'S NAME</p> <p>Street Address</p> <p>City, State and ZIP Code</p> <p>CO-INVENTOR'S NAME</p> <p>Street Address</p> <p>City, State and ZIP Code</p> <p><input type="checkbox"/> Check if additional changes are on reverse side</p>	
SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT
08/292,058	08/17/94	004	MCGLASHEN, M. 1809
First Named Applicant	DATE MAILED		
SOLAZZI, MONTE J.	04/10/95		

TITLE OF INVENTION: APPARATUS FOR TRIMLESS SAMPLE CUP USED IN X-RAY SPECTROSCOPY (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	CHEMPLEX3FWC	422-102.000	K58 UTILITY	YES	\$605.00	07/10/95

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
<p>ARTHUR L. PLEVY PLEVY & ASSOCIATES 146 ROUTE 1 NORTH P.O. BOX 1366 EDISON, NEW JERSEY 08818-1366</p>	<p>1. PLEVY & ASSOCIATES</p> <p>2. _____</p> <p>3. _____</p>

050 4W 01/03/95 08 292 058 1 561 30.00 CK

050 4W 07/03/95 08 292 058 1 242 605.00 CK

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)	
(1) NAME OF ASSIGNEE	(2) ADDRESS: (CITY & STATE OR COUNTRY)
CHEMPLEX INDUSTRIES, INC.	TUCKAHOE, NEW YORK

A. ☐ This application is NOT assigned.

☒ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:	
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(ENCLOSE PART C)	
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(Authorized Signature)	(Date)
ARTHUR L. PLEVY	6-9-95

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